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CONFIRMATION NO. 2255

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| SERIAL NUMBER 10/714,168 | FILING OR 371(c) DATE 11/14/2003 RULE | CLASS 606 | GROUP ART UNIT 3731 | ATTORNEY DOCKET NO. GUA002 | |
| APPLICANTS Carlos A. Guanche, Minneapolis, MN; | | | | | |
| ** CONTINUING DATA ***** None bp | | | | | |
| ** FOREIGN APPLICATIONS ***** None bp | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/17/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Examiner's Signature <u>gmm</u> Initials | | STATE OR COUNTRY MN | SHEETS DRAWING 5 | TOTAL CLAIMS 40 29 | INDEPENDENT CLAIMS 32 |
| ADDRESS 35830 | | | | | |
| TITLE Cannula delivery and support system | | | | | |
| FILING FEE RECEIVED 565 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |